

Optimisation of de-prescribing on a regional Paediatric intensive care unit following the introduction of cease tool

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Introduction:

PICU is a high risk area with frequent prescription of complex medications. Step down to ward level without de-prescribing of these medications has the potential for significant patient harm.

Aim:

To improve de-prescribing on PICU. Auditing before and after the introduction of a five point intervention mnemonic known as the cease tool. Reviewing the tool performance with time and following the introduction of an additional personal Cease reminder sticker.

Charts – are additional charts still in use and appropriate?

Electrolytes – have all 'PICU only' electrolytes been stopped?

Antibiotics – do all antibiotics have a documented plan?

Sedation – has all sedation been stopped or if not is there a documented plan of when and how to stop?

Enteral – if enteral feeds have started has all gastro-protection

Method:

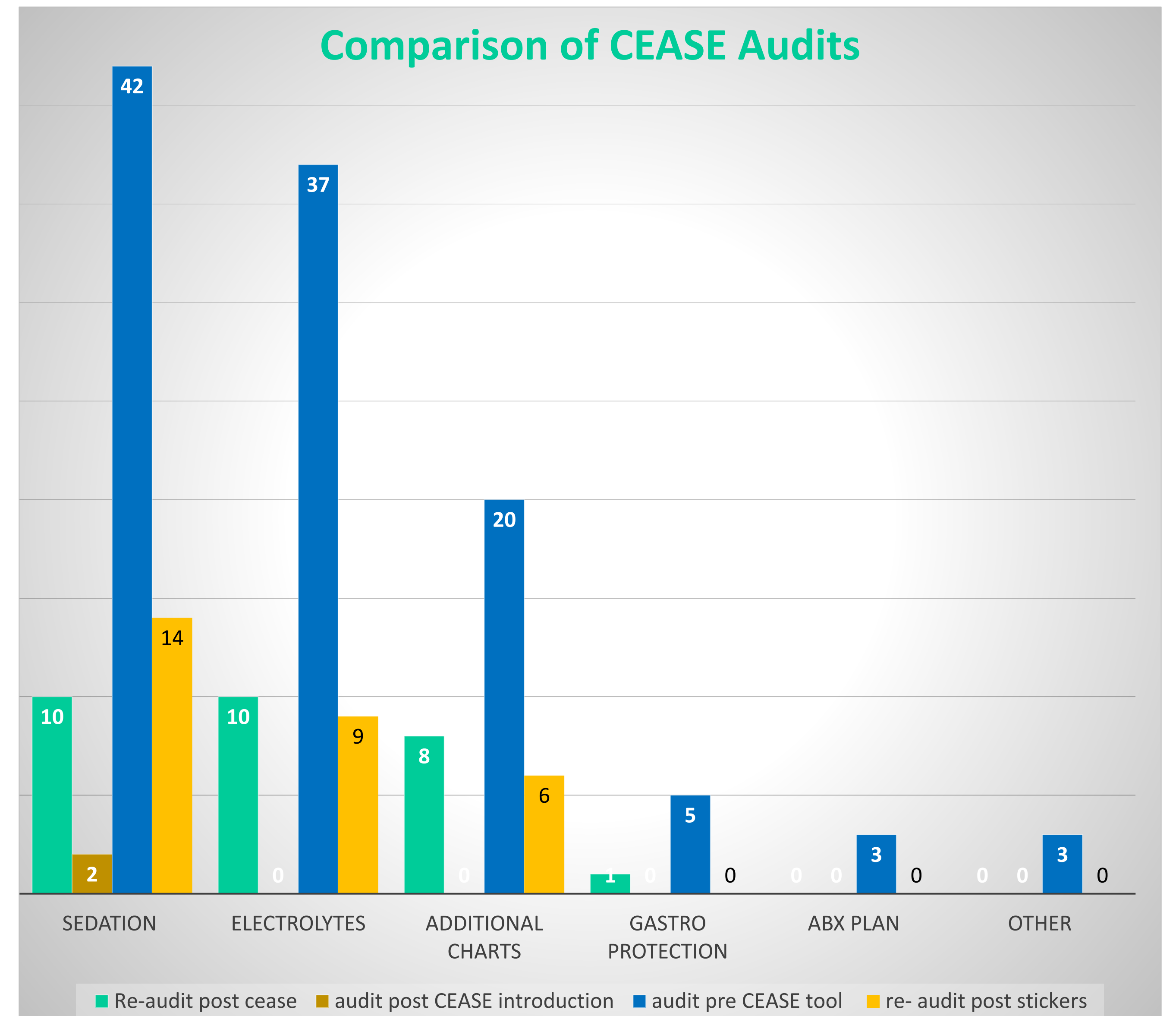
Electronic drugs charts of 25 PICU patients were randomly selected at each audit and reviewed following PICU discharge, to identify the persistence of medication no longer required or unsafe to be given outside of a PICU environment.

Results:

- Prior to the CEASE tool being implemented there were high levels of de-prescribing errors seen with 110 errors identified
- After CEASE introduced errors significantly reduced
- Over time errors increased
- Introduction of stickers caused reduction

Medication not de-prescribed	Audit pre-CEASE	Audit post CEASE	Re-audit post CEASE	Audit post Sticker introduction
Sedation	42	2	10	14
Electrolytes	37	0	10	9
Additional charts	20	0	8	6
Gastro protection	5	0	1	0
Abx plan	3	0	0	0
Other	3	0	0	0

Audit	Total No. of medications not de-prescribed
Pre CEASE introduction	110
Post CEASE introduction	2
Re-audit	33
Post sticker introduction	29



Future work :

- More posters around department as regular reminders of CEASE tool
- CEASE to be discussed at all induction of new doctors include those who do not start at regular changeover dates
- Re-audit after introduction of above measures

Conclusion:

- CEASE tool is a useful memory aid for prescribers when reviewing drug charts prior to discharge
- Over time it can be forgotten and mistakes re-occur
- Introduction of stickers has helped keep the CEASE tool in the forefront of prescribers' minds helping to slightly reduce de-prescribing errors
- Sedation and Electrolytes are most common mistakes which involve most dangerous medication
- All prescribers need to be made aware of the tool when starting on PICU so de-prescribing errors can be eliminated to help improve patient safety

The CEASE tool was introduced to avoid continued use of inappropriate and high-risk medication outside a PICU setting. It has been shown to be successful and work continues to ensure patient safety, antimicrobial stewardship and handover of patients to wards remains at a high standard.